

CLAIM FOR REFUND

TO BE IN COUNTY TRANSPORTATION OFFICE BY THE 5TH OF EACH MONTH

Governing Body _____ County, Alabama

FEIN: _____

County Funds or
Other Reference _____ Date: _____

REMIT TO: D. E. Phillips, Jr., P.E., State County Transportation Engineer
Alabama Department of Transportation
1409 Coliseum Blvd.
Montgomery, Alabama 36110-2060

Claim for Refund of County Engineer's and County Engineer Intern or Graduated Registered Assistant's Salary for the
month of _____ 20_____, as provided by Section 11-6-4 & 11-6-23, Code of Alabama.

COUNTY ENGINEER:

Name: _____

Amount Paid by County \$ _____

Less County's Share \$ _____

*Refund Due by State \$ _____

COUNTY ENGINEER INTERN/ GRADUATE REGISTERED ENGINEER:

Name: _____

Amount Paid by County \$ _____

Less County's Share \$ _____

*Refund Due by State \$ _____

***TOTAL REFUND BY STATE** \$ _____

I hereby certify the within account is true and correct, and that payment therefore has not been received.

Signed: _____
County Official

Sworn to and subscribed before me this _____ day of _____ 20____

My Commission Expires _____ Notary Public: _____

APPROVED: _____ P.E. DATE: _____
STATE COUNTY TRANSPORTATION ENGINEER

DO NOT WRITE BELOW THIS LINE

Account	Function	Object	Amount